



-09/19/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DOCKET NUMBER	ANTICIPATED CLASSIFICATION OF THIS APPLICATION:		PRIOR APPLICATION	
	CLASS	SUBCLASS	EXAMINER	ART UNIT
13033.2USC1	607	042000	F. OROPEZA	3762

CERTIFICATE UNDER 37 CFR 1.10:

"Express Mail" mailing label number: EV322886846US

Date of Deposit: September 19, 2003

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

By:

Name: Teresa Anderson

22154 U.S. PTO
10/665746
09/19/03

CONTINUATION APPLICATION UNDER 37 C.F.R. § 1.53(b)

Mail Stop PATENT APPLICATION

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

This is a request for filing a continuation application under 37 CFR § 1.53(b) of Serial No. 09/409,018, filed on September 29, 1999 entitled IMPLANTABLE STIMULATION DEVICE FOR SNORING TREATMENT by the following inventor(s):

Full Name Of Inventor	Family Name KNUDSON	First Given Name MARK	Second Given Name B.
Residence & Citizenship	City SHOREVIEW	State or Foreign Country MINNESOTA	Country of Citizenship USA
Post Office Address	Post Office Address 1309 WEST ROYAL OAKS DRIVE	City SHOREVIEW	State & Zip Code/Country MINNESOTA 55126/USA
Full Name Of Inventor	Family Name NICKOLOFF	First Given Name ROBERT	Second Given Name S.
Residence & Citizenship	City ST. PAUL	State or Foreign Country MINNESOTA	Country of Citizenship USA
Post Office Address	Post Office Address 1525 SUMMIT AVENUE	City ST. PAUL	State & Zip Code/Country MINNESOTA 55105/USA
Full Name Of Inventor	Family Name CONRAD	First Given Name TIMOTHY	Second Given Name R.
Residence & Citizenship	City EDEN PRAIRIE	State or Foreign Country MINNESOTA	Country of Citizenship USA
Post Office Address	Post Office Address 11068 BRANCHING HORN	City EDEN PRAIRIE	State & Zip Code/Country MINNESOTA 55347/USA

1. ☒ Enclosed is a copy of the prior application; including the specification, claims, drawings, a signed oath or declaration, and any amendments referred to in the oath or declaration filed to complete the prior application. (It is noted that no amendments referred to in the oath or declaration filed to complete the prior application introduced new matter therein.) The continuing application is as follows: 7 pages of specification, 12 claims, 1 page of abstract, 3 sheets of drawings, and 4 pages of oath or declaration.
- ☒ The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

2. ☒ Cancel original claims 2-12 of this application before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)
3. ☒ The filing fee is calculated below:

CLAIMS AS FILED

NUMBER FILED	NUMBER EXTRA		RATE	FEE
TOTAL CLAIMS:				
1 -20	0	x	\$9.00	0.00
INDEPENDENT CLAIMS				
1 -3	0	x	\$42.00	0.00
			BASIC FILING FEE:	\$375.00
			TOTAL FILING FEE:	\$375.00

- ☒ Small entity status is claimed pursuant to 37 CFR 1.27.
4. ☒ Payment of fees:
☒ Attached is a check in the amount of \$375.00
☐ Please charge Deposit Account No. 13-2725.
5. ☒ The Commissioner is hereby authorized to charge any additional fees as set forth in 37 CFR §§ 1.16 to 1.18 which may be required by this paper or credit any overpayment to Account No. 13-2725.
6. ☒ Amend the specification by inserting before the first line the sentence:

"This application is a continuation of application Serial No. 09/409,018, filed September 29, 1999, which application is incorporated herein by reference."
7. ☐ A set of formal drawings (sheets) is enclosed.
8. ☐ Priority of application Serial No. , filed on in , is claimed under 35 U.S.C. 119.
☐ The certified copy has been filed in prior application Serial No. , filed .
9. ☒ The prior application is assigned of record to Restore Medical, Inc. located at St. Paul, Minnesota.
10. ☒ The Power of Attorney in the prior application is to:

Merchant & Gould P.C.
Minneapolis, MN 55402-2215
11. ☐ A preliminary amendment is enclosed. (Claims added by this amendment have been properly numbered consecutively beginning with the number next following the highest numbered original claim in the prior application.)
☐ Fee for excess claims is attached.

12. ☐ A petition and fee has been filed to extend the term in the prior application until . A copy of the petition for extension of time in the prior application is attached.
13. ☐ The inventor(s) in this application are less than those named in the prior application and it is requested that the following inventors identified above for the prior application be deleted:
14. ☐ A Nonpublication Request under 37 CFR 1.213(a) is enclosed.
15. ☐ Also Enclosed:
16. ☒ Address all future communications to the **Attention of Nancy J. Parsons** (may only be completed by attorney or agent of record) at the address below.
17. ☒ A return postcard is enclosed.

Respectfully submitted,

MERCHANT & GOULD P.C.
P.O. Box 2903
Minneapolis, MN 55402-0903
612.332.5300



Date: _____

9/19/03

A handwritten signature in cursive script, appearing to read "Nancy J. Parsons". The signature is written over a horizontal line.

Nancy J. Parsons
Reg. No. 40,364
NParsons:PSTdb